

# **Arizona Medical Board**

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# FINAL MINUTES FOR REGULAR SESSION MEETING Held on April 2, 2008 and April 3, 2008 9535 E. Doubletree Ranch Road · Scottsdale, Arizona

# **Board Members**

William R. Martin III, M.D., Chair Douglas D. Lee, M.D., Vice Chair Dona Pardo, Ph.D., R.N., Secretary Robert P. Goldfarb, M.D., F.A.C.S. Patricia R. J. Griffen Andrea E. Ibáñez Ram R. Krishna, M.D. Todd A. Lefkowitz, M.D. Lorraine L. Mackstaller, M.D. Paul M. Petelin Sr., M.D. Germaine Proulx Amy J. Schneider, M.D., F.A.C.O.G.

#### **EXECUTIVE DIRECTOR'S REPORT**

Lisa S. Wynn, Executive Director, reported to the Board that the total number of licensees in Arizona is 19,400 with 11,200 practicing in the state. Ms. Wynn has been meeting with senior management regarding security at the Agency. She stated the safety and security of Board Staff, Board Members, and visiting public remains a top priority and she is in the process of arranging training for Staff on security and safety awareness. Ms. Wynn informed the Board that the new database is underway and expressed her appreciation to Sandra Waitt, Project Manager, and Lisa McGrane, Investigational Review Manager for their hard work in keeping the implementation of the new database on track.

#### Legislative Update:

House Bill 2769: Partial-birth abortions; would have allowed a defendant accused of knowingly performing a partial-birth abortion to seek a hearing before the Arizona Medical Board on whether the physician's conduct was necessary in order to save the life of the mother. This Bill has been amended to remove the ability for the defendant to seek a hearing before the Arizona Medical Board.

Senate Bill 1078: Writing prescriptions for communicable diseases; there were some concerns that this Bill was very broad. It now defines "communicable disease" and "significant contact."

Senate Bill 1091: Training module for applications; the training module will be web-based and provides the Board the opportunity to be proactive in exposing physicians to the Arizona Medical Practice Act.

Senate Bill 1224: Medical imaging equipment; this Bill was proposed by the Arizona Radiology Society and has been amended to add ordering or performing a diagnostic imaging study that is not reasonably indicated, to the list of unprofessional conduct.

# PROPOSED FUND BALANCE TRANSFER

Ms. Wynn reported that the state is having a tremendous crisis in meeting the end of the fiscal year budget. The Governor's Office has proposed a fund sweep of the 90/10 state boards, including the Arizona Medical Board. The Governor proposed sweeping \$1.3 million from the reserve fund, leaving the Board with \$500,000 in reserve. Ms. Wynn stated that the Agency is operating very comfortably on its own operative budget. However, the Board currently has a Performance Incentive Pay (PIP) program for its employees and should the Governor sweep the amount of money proposed, this program will no longer be available in 2009 and noted that this will result in a pay decrease for Staff. Ms. Wynn stated the Governor's Office has imposed three fund sweeps within the past five years. The Board concluded that they will not submit a written statement to the Governor's Office voicing their displeasure as it will not impact the overall decision.

# LEGAL ADVISOR/LITIGATOR'S REPORT

Deborah S. Golob, M.D. v AMB Court of Appeals' Opinion:

Anne Froedge, Assistant Attorney General, summarized the case for the Board. Dr. Golob was hired by a corporation that operated an online pharmacy. Dr. Golob never personally saw any patients, but prescribed over nine thousand prescriptions in

fifty states and in Europe. After conducting a formal interview, the Board found that Dr. Golob engaged in unprofessional conduct. Dr. Golob received a Decree of Censure, Probation, CME, and a \$10,000 fine. Dr. Golob appealed the Board's decision and there was judicial review in Superior Court. The Board's decision was upheld and Dr. Golob further appealed to the Court of Appeals. The Court of Appeals upheld the Board's decision in a published opinion. The Board expressed its appreciation for the services provided by its legal counsel.

#### APPROVAL OF MINUTES

MOTION: Ms. Griffen moved to approve the February 6-7, 2008 Regular Session Meeting Minutes, Including Executive Session; and the March 7, 2008 Emergency Teleconference Meeting Minutes.

SECONDED: Dr. Lee

VOTE: 7-yay, 0-nay, 0-abstain, 0-recuse, 5-absent.

MOTION PASSED.

#### ADVISORY LETTERS

MOTION: Dr. Krishna moved to issue the Advisory Letter in item numbers 2, 3, 4, 9, 12, 13, 14, 17, 19, 23, 25, 26, 27, 29,

and 31.

SECONDED: Dr. Lee

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

**MOTION PASSED.** 

NO.	CASE NO.	COMP	PLAINANT v PHYSICIAN	LIC.#	RESOLUTION
1.	MD-07-0297A	AMB	MICHAEL J. FLORES, M.D.	15978	Issue an Advisory Letter for failing to maintain and retain adequate medical records. This was a one time occurrence. Within 9 months obtain 17 hours non-disciplinary CME in recordkeeping.

Dr. Lee was recused from this case. Dr. Mackstaller pulled this case for discussion and stated that Dr. Flores was appropriate in his dispensing, but he failed to maintain adequate records. Dr. Pardo stated she was concerned that Dr. Flores had no medical records for the patient involved in this case.

MOTION: Dr. Mackstaller moved for Dismissal.

SECONDED: Dr. Schneider

Dr. Mackstaller noted that Dr. Flores has no prior Board history and acted appropriately in this case. Dr. Schneider noted that the patient did not have health insurance and stated that Dr. Flores' intention may have been to save the patient from paying a large hospital bill. Dr. Martin spoke against the motion and stated he appreciated Dr. Flores' service to the community, but at the same time, Arizona statute requires physicians to maintain medical records.

VOTE: 4-yay, 5-nay, 0-abstain, 1-recuse, 2-absent. MOTION FAILED.

MOTION: Dr. Pardo moved to issue an Advisory Letter for failing to maintain and retain adequate medical records. This was a one time occurrence. Within 9 months obtain 17 hours non-disciplinary CME in recordkeeping.

SECONDED: Ms. Proulx

VOTE: 9-yay, 0-nay, 0-abstain, 1-recuse, 2-absent.

MOTION PASSED.

1110	HOTION I AGGED.									
NO.	CASE NO.	СОМІ	PLAINANT v PHYSICIAN	LIC.#	RESOLUTION					
2.	MD-07-0360A	AMB	OREN W. LAMM, M.D.		Issue an Advisory Letter for failing to continue hospitalization for a patient with a worsening chest x-ray following blunt thoracic trauma and for inadequate medical records. This was a one time occurrence.					
3.	MD-07-0400A	AMB	GEORGE H. WEBB, M.D.	14417	Issue an Advisory Letter for failing to administer Rhogam to a patient who is RH negative during pregnancy prophylactically and postpartum when she delivered an RH positive baby and for inadequate medical records. This matter does not rise to the level of discipline.					
4.	MD-07-0459A	AMB	CINDY H. SIROIS, M.D.		Issue an Advisory Letter for action taken by another state for failure to disclose truthful information on her Alaska licensing application. This matter does not rise to the level of discipline.					
5.	MD-07-0477A	R.L.	STANLEY W. COULTHARD, M.D.	9899	Dismiss.					

Dr. Goldfarb stated that he knew Dr. Coulthard professionally, but it would not affect his ability to adjudicate the case. Dr. Mackstaller stated she refers patients to Dr. Coulthard, but it would not affect her ability to adjudicate the case. The Outside Medical Consultant found that Dr. Coulthard did not deviate from the standard of care, but failed to maintain adequate medical records.

MOTION: Dr. Mackstaller moved for Dismissal.

SECONDED: Dr. Martin

VOTE: 9-yay, 1-nay, 0-abstain, 0-recuse, 2-absent.

#### MOTION PASSED.

NO.	CASE NO.	COV	MPLAINANT v PHYSICIAN	LIC.#	RESOLUTION
6.	MD-07-0578A	D.L.	SHANE L. MARTIN, M.D.	34339	Issue an Advisory Letter for placing a suture through half of the sciatic nerve. This was a one time technical error.

This case involved Dr. Martin placing a suture through the sciatic nerve during surgery. Board Staff informed the Board that depending on one's surgical technique, there are different ways to prevent this from happening. However, this is a known complication.

MOTION: Dr. Goldfarb moved to issue an Advisory Letter for placing a suture through half of the sciatic nerve. This was a one time technical error.

SECONDED: Dr. Krishna

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	COMPLAINA	ANT v PHYSICIAN	LIC.#	RESOLUTION
7.	MD-07-0335A	AMB	EDGARDO D. ZAVALA-ALARCON, M.D.	27016	Invite the physician for a formal interview.

Dr. Goldfarb pulled this case for discussion and stated that a physician should not write a letter containing false information under any circumstance.

MOTION: Dr. Goldfarb moved to invite the physician for a formal interview.

SECONDED: Dr. Mackstaller

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	COMP	LAINANT v PHYSICIAN	LIC.#	RESOLUTION
8.	MD-07-0402A	A.P.	BRIAN J. BURNS, M.D.	Post Graduate Permit 81164	Dismiss.

Dr. Mackstaller stated she knew Dr. Burns, but it would not affect her ability to adjudicate this case. Dr. Burns addressed the Board during the call to public. He stated that the patient's test results were not available until ten days after his residency rotation to another hospital, and asked the Board to dismiss this case. The Board noted that when moving along in the rotation, it is difficult to obtain charts for patients that are no longer assigned to them.

MOTION: Dr. Mackstaller moved for Dismissal.

SECONDED: Dr. Lee

Dr. Martin stated that there has to be some way to protect the public even when rotation services change and questioned whether Dr. Burns' attending physician should be investigated. Board Staff informed the Board that the attending had been referred to the appropriate licensing authority for his/her involvement in this case.

# VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent. MOTION PASSED.

NO.	CASE NO.	СОМ	PLAINANT v PHYSICIAN	LIC.#	RESOLUTION
9.	MD-07-0438A	AMB	NETLEY J. D'SOUZA, M.D.	20377	Issue an Advisory Letter for failing to interpret PSA results and recommend urological consultation in the face of elevated results and failing to perform a rectal exam to further evaluate the elevated PSA or indicate that a urologist would soon do a rectal exam. This matter does not rise to the level of discipline.
10.	MD-07-0497C	M.M.	MARK A. STRUMPF, M.D.	13083	Issue an Advisory Letter for failing to adequately document medical decision making or informed consent for a complex patient. This matter does not rise to the level of discipline. Within 9 months obtain 17 hours non-disciplinary CME in recordkeeping.

Dr. Pardo pulled this case for discussion and stated she was concerned that Dr. Strumpf received an Advisory Letter in 1997 regarding medical recordkeeping.

MOTION: Dr. Pardo moved to issue an Advisory Letter for failing to adequately document medical decision making or informed consent for a complex patient. This matter does not rise to the level of discipline. Within 9 months obtain 17 hours non-disciplinary CME in recordkeeping.

SECONDED: Ms. Proulx

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

N	. CASE NO.	COMI	PLAINANT v PHYSICIAN	LIC.#	RESOLUTION
1	. MD-07-0610A	C.S.	MADHABHAI J. DUNGARANI, M.D.	19536	Issue an Advisory Letter for failing to obtain the pertinent laboratory tests for a child presenting with recurrent infections and failing to refer to a specialist for further evaluation. This matter does not rise to the level of discipline. Within 9 months obtain 17 hours non-disciplinary

CME in recordkeeping.

Dr. Pardo pulled this case for discussion and noted that Dr. Dungarani's records were illegible.

MOTION: Dr. Pardo moved to issue an Advisory Letter for failing to obtain the pertinent laboratory tests for a child presenting with recurrent infections and failing to refer to a specialist for further evaluation. This matter does not rise to the level of discipline. Within 9 months obtain 17 hours non-disciplinary CME in recordkeeping.

SECONDED: Dr. Martin

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	COMP	PLAINANT v PHYSICIAN	LIC.#	RESOLUTION
12.	MD-07-0753A	AMB	JAMES G. LEIFERMAN, M.D.	20527	Issue an Advisory Letter for prescribing a controlled substance to an immediate family member. This is a one time occurrence that does not rise to the level of discipline.
13.	MD-07-0944A	C.H.	DENNIS E. FRAZIER, M.D.	31579	Issue an Advisory Letter for failing to perform a neurological exam and for inadequate medical records. This matter does not rise to the level of discipline.
14.	MD-07-L036A	AMB	DIANA L. VERDE, M.D.	Certificate	Issue an Advisory Letter for inadequate medical records and for failure to order appropriate baseline and monitoring laboratory and EKG testing when prescribing Lithium and Desipramine. This matter does not rise to the level of discipline.
15.	MD-07-0542A	V.M.	EDWARD EADES, M.D.	19656	Issue and Advisory Letter for inadequate medical records. This was a one time occurrence. Within 9 months obtain 17 hours non-disciplinary CME in recordkeeping.

Dr. Pardo pulled this case for discussion and noted that Dr. Eades has a recent Advisory Letter for documentation issues. Dr. Pardo recommended Dr. Eades obtain non-disciplinary CME in recordkeeping. Dr. Martin agreed and stated that this matter does not rise to the level of discipline, but if this remains an issue it would rise to a higher level of Board action.

MOTION: Dr. Pardo moved to issue an Advisory Letter for inadequate medical records. This was a one time occurrence. Within 9 months obtain 17 hours non-disciplinary CME in recordkeeping.

**SECONDED: Ms. Proulx** 

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

**MOTION PASSED.** 

NO.	CASE NO.	COMPLAIN	ANT v PHYSICIAN	LIC.#	RESOLUTION
16.	MD-07-0758A	J.Y.	AZBER A. ANSAR, M.D.	33994	Dismiss.

Dr. Ansar was present and spoke during the call to public. It was alleged that Dr. Ansar did not address patient JY's hyperlipidemia in a timely fashion. Dr. Ansar stated JY did not like to take medication and refused to receive treatment for his hyperlipidemia. Dr. Ansar is licensed in sixteen states and stated that JY sent the same type of complaint to each licensing board. He stated no other state has taken action against his license based on JY's complaints and he asked that the Board do the same as he believes he addressed the hyperlipidemia in a timely manner. Board Staff summarized the case and stated that Dr. Ansar never documented that he discussed hyperlipidemia treatment with JY. Dr. Mackstaller disagreed and found that the dietician documented a discussion with JY regarding the treatment.

MOTION: Dr. Lee moved to issue an Advisory Letter for failing to address hyperlipidemia in a conclusive fashion and for inadequate medical records. One time technical error that does not rise to the level of discipline.

SECONDED: Dr. Krishna

Dr. Mackstaller referred Board Members to a letter written to JY from Dr. Ansar regarding his lipid test results. Dr. Lee stated that Dr. Ansar failed to document JY's refusal to receive treatment and failed to appropriately followup with JY.

VOTE: 2-yay, 8-nay, 0-abstain, 0-recuse, 2-absent. MOTION FAILED.

MOTION: Dr. Mackstaller moved for Dismissal.

SECONDED: Dr. Goldfarb

VOTE: 8-yay, 2-nay, 0-abstain, 0-recuse, 2-absent.

NO.	CASE NO.	COMP	PLAINANT v PHYSICIAN	LIC.#	RESOLUTION
17.	MD-07-0186A	S.P.	CHARLES A. CALKINS, M.D.	9848	Issue an Advisory Letter for failure to properly supervise a physician assistant and for inadequate medical records. This was a one time occurrence that does not rise to the level of discipline.
18.	MD-07-0202A	AMB	JEFFREY A. ZUHL, M.D.	21892	Issue an Advisory Letter for failure to consider other conditions and conduct appropriate tests when evaluating a patient with multiple cavitary lung lesions. This was a one time occurrence that does not rise to the level

		of discipline.
		or diodiplino.

Robin Burgess, legal counsel for Dr. Zuhl, addressed the Board during the call to public. She stated that the patient involved in this case was referred to him for evaluation and treatment for presumptive valley fever. The Medical Consultant who reviewed this case felt that Dr. Zuhl should have included Wegener's granulomatosis in his differential diagnosis. Ms. Burgess stated that the patient demonstrated signs and symptoms of valley fever and that is what Dr. Zuhl was treating. She stated that the patient responded well to the treatment and was improving. Subsequently, the patient had more symptoms and was hospitalized. The patient was again diagnosed with valley fever; however, renal testing obtained during that hospital stay revealed the patient had Wegener's granulomatosis. Kelly Sems, M.D., Chief Medical Consultant, commented that Wegener's granulomatosis is difficult to diagnose. She stated that most patients who are diagnosed with it are usually farther along in the disease. She stated that the Medical Consultant (pulmonology) felt that Dr. Zuhl, as a pulmonologist, should have been considering more than just valley fever in his diagnoses. Dr. Mackstaller stated she was bothered that Dr. Zuhl did not broaden his differential diagnoses. She noted that Dr. Zuhl was giving the patient Diflucan without any further testing.

MOTION: Dr. Goldfarb moved to issue an Advisory Letter for failure to consider other conditions and conduct appropriate tests when evaluating a patient with multiple cavitary lung lesions. This was a one time occurrence that does not rise to the level of discipline.

SECONDED: Dr. Lee

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	COMP	PLAINANT v PHYSICIAN	LIC.#	RESOLUTION
19.	MD-07-0343A	AMB	ROBERT K. UEDA, M.D.	25182	Issue an Advisory Letter for failing to ensure that he had received enough clinical information and enough images to address the clinical question and for failing to accurately interpret the images provided for two patients. This matter does not rise to the level of discipline.
20.	MD-07-0442A	M.G.	HENRY L. HUDSON, M.D.	24189	Issue an Advisory Letter for inadequate medical records and for failure to fully dilate a patient's pupils prior to a retinal examination. This matter does not rise to the level of discipline. Within 9 months obtain 17 hours non-disciplinary CME in recordkeeping.

Dr. Mackstaller was recused from this case. Dr. Lefkowitz stated that the retina cannot be adequately worked up without first adequately dilating the pupil.

MOTION: Dr. Pardo moved to issue an Advisory Letter for inadequate medical records and for failure to fully dilate a patient's pupils prior to a retinal examination. This matter does not rise to the level of discipline. Within 9 months obtain 17 hours non-disciplinary CME in recordkeeping.

**SECONDED: Ms. Proulx** 

VOTE: 8-yay, 0-nay, 1-abstain, 1-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	COMPLAINANT v PHYSICIAN		LIC.#	RESOLUTION
21.	MD-07-0735A	E.M.	KRISTINE A. ROMINE, M.D.	31198	Issue an Advisory Letter for failure to use properly accredited technicians in performing laser treatment. This was a one time occurrence that does not rise to the level of discipline.

Dr. Goldfarb stated that Dr. Romine is responsible for the laser technician who did not meet the qualifications. The Board noted that the patient's sores, swelling and redness are typical in laser hair removal.

MOTION: Dr. Goldfarb moved to issue an Advisory Letter for failure to use properly accredited technicians in performing laser treatment. This was a one time occurrence that does not rise to the level of discipline.

SECONDED: Dr. Mackstaller

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

NO.	D. CASE NO. COMPLAINANT v PHYSICIAN		LIC.#	RESOLUTION	
22.	MD-07-0886A	V.H.	CHAMAN L. LUTHRA, M.D.	10655	Issue an Advisory Letter for failing to refer VH to a retinal specialist in a timely manner and for inadequate medical records. This matter does not rise to the level of discipline.

Dr. Krishna was recused from this case. Pete Fisher, legal counsel for Dr. Luthra, addressed the Board during the call to public. He stated Dr. Luthra has been practicing for thirty years with no prior Board history. He asked the Board to issue Dr. Luthra non-disciplinary CME in management of cataract surgery, but without the issuance of the Advisory Letter.

MOTION: Dr. Goldfarb moved to accept the Motion for Good Cause to allow late submission of material to the Board.

SECONDED: Dr. Lee

VOTE: 9-yay, 0-nay, 0-abstain, 1-recuse, 2-absent.

This case involved cataract surgery performed by Dr. Luthra. During the procedure there was a complication and a different ocular lens was inserted with a concern that lens material was left behind. Dr. Lefkowitz stated the rupture of the capsule is a recognized complication. He said if any material is noted at the time of the rupture, it would be prudent to advise a rapid follow up with a retinal specialist.

MOTION: Dr. Lee moved to issue an Advisory Letter for failing to refer VH to a retinal specialist in a timely manner and for inadequate medical records. This matter does not rise to the level of discipline.

SECONDED: Dr. Pardo

VOTE: 10-yay, 0-nay, 0-abstain, 1-recuse, 1-absent.

#### MOTION PASSED.

N	0.	CASE NO.	COMPLAINANT v PHYSICIAN		LIC.#	RESOLUTION
2	3.	MD-07-0234A	AMB	ROBERT F. OLIVERE, M.D.	10637	Issue an Advisory Letter for failure to maintain adequate medical records. This was a one time occurrence that does not rise to the level of discipline.
2	4.	MD-07-0654A	AMB	KATHERINE E. MC CUAIG, M.D.	21138	Dismiss.

Dr. Mc Cuaig was present and spoke during the call to public. She explained to the Board the circumstances that led to her using a physician assistant (PA) in the operating room prior to receiving Board approval to supervise the PA. She said it did not occur to her that she needed to submit paperwork any differently than she would when using a nurse or technician, as they assisted in the same capacity. Once she was aware of the requirement, she immediately filed the paperwork and received Board approval. She expressed concern that if she were issued an Advisory Letter, other organizations would assume it was due to patient care. Dr. Goldfarb recalled a number of cases that were previously dismissed by the Board regarding the same issue. Dr. Goldfarb spoke in favor of dismissal as this case occurred prior to the publication of the Board's Guidelines for Supervision of PAs.

MOTION: Dr. Goldfarb moved for Dismissal.

SECONDED: Dr. Lefkowitz

The Board confirmed that the Board will issue actions to physicians if similar incidents occur subsequent to the publication of the PA Supervision Guidelines.

# VOTE: 9-yay, 1-nay, 0-abstain, 0-recuse, 2-absent. MOTION PASSED.

NO.	CASE NO.	COMP	PLAINANT v PHYSICIAN	LIC.#	RESOLUTION
25.	MD-07-0805A	K.A.	SURESH V. BALENALLI, M.D.		Issue an Advisory Letter for failure to maintain adequate medical records. This was a one time occurrence that does not rise to the level of discipline.
26.	MD-07-0847A	AMB	ROBERT NADOL, M.D.	34350	Issue and Advisory Letter for failure to maintain adequate medical records. This matter does not rise to the level of discipline.
27.	MD-07-0927A	B.T.	PAUL J. KELLEY, M.D.	14810	Issue an Advisory Letter for inappropriate billing that is not supported by the documentation. This was a one time occurrence that does not rise to the level of discipline.
28.	MD-07-0749B	AMB	SUNGNAM JOE, M.D.	24593	Invite the physician for a formal interview.

The Board noted that by the time the patient involved in this case was seen by a urologist, the patient was in respiratory arrest. Dr. Goldfarb stated that the urologist should have assessed the patient in a timelier manner and stated he was concerned that the consultation was not described as urgent.

MOTION: Dr. Goldfarb moved to invite the physician for a formal interview.

SECONDED: Dr. Krishna

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

Dr. Pardo thanked Board Staff for referring this matter to the Arizona Board of Nursing.

NO.	CASE NO.	COMP	PLAINANT v PHYSICIAN	LIC.#	RESOLUTION
29.	MD-07-0755A	C.R.	CHARLES S. PLIMPTON, M.D.	20429	Issue an Advisory Letter for failure to properly supervise a nurse midwife with failure to counsel a patient regarding their Rh status and need for future treatment, and for inadequate medical records. This was a one time occurrence that does not rise to the level of discipline.
30.	MD-07-0772A	D.E.	JOSEPH A. LONGO, M.D.	18636	Invite the physician for a formal interview.

Dr. Martin stated he knew Dr. Longo, but that it would not affect his ability to adjudicate this case. Dr. Goldfarb pulled this case for discussion noting that the patient was not informed of a fracture. Dr. Krishna noted that the fracture was not indicated on x-ray until a later time. The Board noted Dr. Longo's prior Board history included an Advisory Letter for a similar violation and Board Staff informed the Board that the previous incident occurred around the same time as this one. Board Members expressed their concern stating that issuing an Advisory Letter with non-disciplinary CME would not address the issue.

MOTION: Dr. Pardo moved to invite the physician for a formal interview.

SECONDED: Dr. Goldfarb

VOTE: 9-yay, 1-nay, 0-abstain, 0-recuse, 2-absent.

**MOTION PASSED.** 

NO.	O. CASE NO. COMPLAINANT v PHYSICIAN		LIC.#	RESOLUTION	
31.	MD-07-0602A	J.K.	MARK T. CALLESEN, M.D.	23058	Issue an Advisory Letter for failing to document notification of changes to the treatment plan to the minor's mother. This is a one time violation that does not rise to the level of discipline.

# REVIEW OF EXECUTIVE DIRECTOR (ED) DISMISSALS

MOTION: Dr. Krishna moved to uphold the ED Dismissal in item numbers 1-8.

SECONDED: Ms. Griffen

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	COMPLAINANT v PHYSICIAN	LIC.#	RESOLUTION
1.	MD-07-0264A	F.L. ALLEN M. GERMAINE, M.D.	15647	Uphold ED Dismissal

FL was present and spoke during the call to public. She stated that Dr. Germaine was her mother's primary care provider for the last decade of her life. She questioned if Dr. Germaine assessed her mother's condition appropriately, her ability to care for the wound on her foot, or her ability to perform daily activities. FL stated Dr. Germaine did not check her mother's cognitive status as she was noted to have dementia.

NO.	CASE NO.	COMPLAINANT v PHYSICIAN	LIC.#	RESOLUTION
2.	MD-07-0221A	M.P. KARL B. HIATT, M.D.	19230	Uphold ED Dismissal

MP addressed the Board during the call to public along with her husband. She stated she underwent rhinoplasty performed by Dr. Hiatt and that she has had complications since the procedure. She said she contacted him repeatedly, but he continued to state that he did nothing wrong. She further stated that she had spent over twelve thousand dollars in corrective surgery, but still required additional surgeries to correct the problem. MP's husband told the Board that the surgery was clearly botched and referred Board Members to letters of support in the investigative file.

NO.	CASE NO.	COMPL	AINANT v PHYSICIAN	LIC.#	RESOLUTION
3.	MD-06-1034A	R.Z.	DOMINIC J. DESSABLES, M.D.	29122	Uphold ED Dismissal
4.	MD-07-0657A	B.H.	THEODORE R. HOFSTEDT, M.D.	23010	Uphold ED Dismissal
5.	MD-07-0187A	M.S.	J. DUDLEY PYEATT, M.D.	28137	Uphold ED Dismissal
6.	MD-07-0687A	K.S.	BOYD R. BURKHARDT, M.D.	4802	Uphold ED Dismissal
7.	MD-07-0492A	B.C.	ASHISH M. SHAH, M.D.	25506	Uphold ED Dismissal
8.	MD-07-0591C	C.R.	JOSEPH L. CHATHAM, M.D.	15177	Uphold FD Dismissal

# OTHER BUSINESS

MOTION: Dr. Lee moved to accept proposed consent agreements in item numbers 2-6.

**SECONDED: Ms. Proulx** 

ROLL CALL VOTE: Roll call vote was taken and the following Board Members voted in favor of the motion: Dr. Goldfarb, Ms. Griffen, Dr. Lee, Dr. Lefkowitz, Dr. Mackstaller, Dr. Martin, Dr. Pardo, Dr. Petelin, Ms. Proulx, and Dr. Schneider. The following Board Members were absent: Ms. Ibáñez and Dr. Krishna.

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	CO	MPLAINANT v PHYSICIAN	LIC.#	SUBJECT			
1.	MD-07-0374A	AMB	ALEXANDER VILLARES, M.D.	32704	Reject the proposed consent agreement and modify the terms to include Five Years Probation, 20 hours CME in ethics, and chart reviews.			

Dr. Petelin was recused from this case. Howard Davis addressed the Board during the call to public on behalf of the patient. He did not believe that Dr. Villares ever physically examined the patient. He stated that he and the patient sought a second opinion and within twenty minutes, the other provider took the patient to surgery stating that the patient's intestines had ruptured several days earlier. Dr. Goldfarb pulled this case for discussion and stated that the Board Order should be more inclusive as Dr. Villares failed to timely see two patients with small bowel obstruction and failed to maintain adequate records.

MOTION: Dr. Goldfarb moved to reject the consent agreement and modify the terms to include Five Years Probation, 20 hours CME in ethics, and chart reviews.

SECONDED: Dr. Lee

ROLL CALL VOTE: Roll call vote was taken and the following Board Members voted in favor of the motion: Dr. Goldfarb, Ms. Griffen, Dr. Lee, Dr. Lefkowitz, Dr. Mackstaller, Dr. Martin, Dr. Pardo, Ms. Proulx and Dr. Schneider. The following Board Members were absent: Ms. Ibáñez and Dr. Krishna.

VOTE: 9-yay, 0-nay, 0-abstain, 1-recuse, 2-absent.

NO.	CASE NO.	C	COMPLAINANT v PHYSICIAN	LIC.#	SUBJECT
2.	MD-07-0283A	AMB	JAMES E. JONES, M.D.	5349	Accept proposed consent agreement for a Letter of Reprimand for failure to aggressively treat a patient's hypotension after placement of a spinal anesthetic, for failure to appreciate the patient's volume status and for failure to maintain adequate records.
3.	MD-07-0690A MD-07-0546A MD-07-0689A MD-07-0565A MD-07-0534A MD-06-0911A MD-06-0800A MD-07-0304A	R.W. R.M. S.W. C.H. M.A. E.D. J.W. H.R.	PATRICIA L. CLARKE, M.D.	26877	Accept proposed consent agreement for a Decree of Censure for failure to appropriately diagnose and treat diabetes and pertussis in a patient; for inappropriately diagnosing two patients with diabetes; for documenting that a glucometer was medically necessary for a patient who did not have diabetes; for inappropriately prescribing Biaxin for a possible urinary tract infection; for failure to properly identify a patient prior to discussing a medical diagnosis; for failure to notify a patient regarding an abnormal x-ray result; for failure to provide complete pap smear results upon patient's request in a timely manner; for inappropriate billing; for failure to perform and order appropriate laboratory testing for amenorrhea; for failure to obtain baseline height and weight in a child with nutritional deficiency and for failure to maintain adequate medical records. Five Years Probation with PACE evaluation within 60 Days and bi-monthly chart review.
4.	MD-07-0812A	AMB	JORGE L. ALSINA, M.D.	36102	Accept proposed consent agreement for a Letter of Reprimand for action taken by another state. One Year Probation in which the physician shall comply with the Florida Board Order requiring he attend CME courses. Probation to terminate upon successful completion of the CME.
5.	MD-07-0431A	AMB	DOUGLAS A. SLAUGHTER, M.D.	23614	Accept proposed consent agreement for a Letter of Reprimand for failure to properly perform a kyphoplasty procedure resulting in the extravasation of cement and paraplegia in a patient and for failure to inform a patient of the benefits, risks and complications of that procedure.

Dr. Martin was recused from this case.

NO.	CASE NO.	C	COMPLAINANT v PHYSICIAN	LIC.#	SUBJECT
6.	MD-07-0752A	AMB	RICHARD J. WHITMAN, M.D.	14188	Accept proposed consent agreement for a Letter of Reprimand for failure to follow up with a patient with possible small bowel obstruction until three days after an initial visit and for failure to familiarize himself with the results of the computed tomography scan performed.
7.	MD-05-0861A	AMB	MITCHELL R. HALTER, M.D.	29626	Approve Modification of Board Order.

Dr. Goldfarb and Dr. Mackstaller were recused from this case. Dr. Halter completed the required CME from his previous Order and has requested the Board to lift his practice restriction. Sue Dana, Compliance Officer, stated that she felt the CME that Dr. Halter underwent was adequate and addressed the Board's concerns. Kelly Sems, M.D., Chief Medical Consultant, stated if the Board was concerned with Dr. Halter's technical skills and abilities and clinical knowledge, these issued may be addressed through Physician Assessment and Clinical Evaluation (PACE). Dr. Martin stated that Dr. Halter did what the Board requested and that it would be unfair for the Board to request more of him. The Board noted that Dr. Halter's probation will not expire for two more years. Dr. Pardo agreed that Dr. Halter satisfied the CME requirements of his probation, but suggested he complete the remainder of his probation.

MOTION: Dr. Schneider moved to approve the Modification of Board Order.

SECONDED: Dr. Petelin

Dr. Lee spoke against the motion and stated he felt Dr. Halter partially met the requirements of his Order. He stated he was still concerned with his ability in recognizing and caring for complications involving infection. Dr. Martin stated that in spite of Dr. Halter completing the CME, he was concerned with Dr. Halter's competency.

ROLL CALL VOTE: Roll call vote was taken and the following Board Members voted in favor of the motion: Ms. Griffen, Dr. Lefkowitz, Dr. Martin, Dr. Pardo, Dr. Petelin, Ms. Proulx, and Dr. Schneider.

The following Board Members voted against the motion: Dr. Lee. The following Board Members were recused: Dr. Goldfarb and Dr. Mackstaller. The following Board Members were absent: Ms. Ibáñez and Dr. Krishna.

VOTE: 7-yay, 1-nay, 0-abstain, 2-recuse, 2-absent.

MOTION PASSED.

Anne Froedge, Assistant Attorney General, clarified that the Board would need to find a specific statutory violation in order to conduct a chart review during the remainder of his probationary period.

MOTION: Dr. Martin moved to go into executive session.

SECONDED: Dr. Pardo

Vote: 8-yay, 0-nay, 0-abstain, 2-recuse, 2-absent.

MOTION PASSED.

The Board went into Executive Session for legal advice at 3:19 p.m.

The Board returned to Open Session at 3:24 p.m.

No deliberations or discussions were made during Executive Session.

NO.	CASE NO.	COI	MPLAINANT v PHYSICIAN	LIC.#	RESOLUTION
1 X	MD-07-0139A MD-06-0925A	R.P. J.J.	JOHN V. DOMMISSE, M.D.	22164	Uphold ED referral to Formal Hearing.

MOTION: Dr. Martin moved to go into executive session.

SECONDED: Dr. Goldfarb

Vote: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

The Board went into Executive Session for legal advice at 11:57 p.m.

The Board returned to Open Session at 12:04 p.m.

No deliberations or discussions were made during Executive Session.

The Board noted Dr. Dommisse's significant Board history.

MOTION: Dr. Martin moved to uphold the ED referral to Formal Hearing.

SECONDED: Dr. Lee

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

**MOTION PASSED.** 

NO.	CASE NO.	COMPLAINANT v PHYSICIAN		RESOLUTION
10.	MD-05-0884A	AMB HARSHAD S. PATEL, M.D.	22757	Approve Modification of Board Order.

Dr. Patel requested that the Board allow him to treat male patients without a chaperone present, and to treat female patients with a chaperone. Dr. Petelin noted that if Dr. Patel's request was approved by the Board, the conditions of his Probation would still apply.

MOTION: Dr. Lee moved to approve the Modification of Board Order.

SECONDED: Dr. Petelin

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

N	0.	CASE NO.	CON	MPLAINANT v PHYSICIAN	LIC.#	RESOLUTION
1	1.	MD-07-0290A	AMB	SUSAN B. FLEMING, M.D.	14840	Reject proposed consent agreement and change the terms to include chart reviews.

Dr. Goldfarb was recused from this case. Dr. Schneider noted that the proposed consent agreement was a modification to Dr. Fleming's previous Board Order. The Board requested the consent agreement be modified to include chart reviews to ensure that Dr. Fleming has changed her practice.

MOTION: Dr. Schneider moved to reject proposed consent agreement and change the terms to include chart reviews.

SECONDED: Dr. Lee

ROLL CALL VOTE: Roll call vote was taken and the following Board Members voted in favor of the motion: Ms. Griffen, Dr. Lee, Dr. Lefkowitz, Dr. Mackstaller, Dr. Martin, Dr. Petelin, Ms. Proulx, and Dr. Schneider. The following Board Members voted against the motion: Dr. Pardo. The following Board Member was recused: Dr. Goldfarb. The following Board Members were absent: Ms. Ibáñez and Dr. Krishna.

VOTE: 8-yay, 1-nay, 0-abstain, 1-recuse, 2-absent.

**MOTION PASSED.** 

The Board confirmed that the chart reviews will be within six months from the effective date.

NO.	CASE NO.	COI	MPLAINANT v PHYSICIAN	LIC.#	RESOLUTION
12.	MD-07-0161A	AMB	HILARIO JUAREZ, M.D.	12148	Approve draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand for failure to perform a timely and adequate history and physical, inadequate documentation of an operative procedure and inaccurate documentation of a physical examination. One Year Probation to obtain 17 hours CME in recordkeeping and documentation. Probation to terminate upon successful completion of the CME.

MOTION: Dr. Pardo moved to approve the draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand for failure to perform a timely and adequate history and physical, inadequate documentation of an operative procedure

and inaccurate documentation of a physical examination. One Year Probation to obtain 17 hours CME in recordkeeping and documentation. Probation to terminate upon successful completion of the CME.

SECONDED: Dr. Schneider.

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	CO	MPLAINANT v PHYSICIAN	LIC.#	RESOLUTION
13.	MD-07-0273A	AMB	ALLEN A. AGAPAY, M.D.	24148	Approve draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand for failing to review an abdominal CT scan and/or subsequent report. Probation to obtain 20 hours CME in medical ethics to be completed in six months. Probation to terminate upon successful completion of the CME.

The Board noted that the draft Findings of Fact, Conclusions of Law and Order have been modified to reflect that the CME hours are in addition to Dr. Agapay's biennial requirement. The Board confirmed that it reviewed, but rejected the modifications requested by opposing counsel.

MOTION: Dr. Lee moved to approve the draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand for failing to review an abdominal CT scan and/or subsequent report. Probation to obtain 20 hours CME in medical ethics to be completed in six months. Probation to terminate upon successful completion of the CME.

SECONDED: Ms. Griffen

VOTE: 10yay, 0-nay, 0-abstain, 0-recuse, 2absent.

MOTION PASSED.

Dr. Martin noted that a number of cases reviewed by the Board have involved Lake Havasu Hospital, including three at this meeting. Dr. Martin opined that this hospital did not seem to meet their statutory requirements in reporting physicians to the Board. Ms. Wynn informed the Board that it has the ability to report facilities to the Arizona Department of Health Services. Dr. Martin instructed Staff to do so as well as followup. Anne Froedge, Assistant Attorney General, stated the matter may be placed on a future agenda for followup.

NO.	CASE NO.	COI	MPLAINANT v PHYSICIAN	LIC.#	RESOLUTION
14.	MD-07-0571A	J.L.	DONALD E. PORTER, M.D.	13521	Approve draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand for failing to consider and pursue a diagnosis of pulmonary embolism and failing to perform an adequate examination, including pulse oximetry and measuring of vital signs in a patient complaining of respiratory symptoms.

Drs. Lee and Goldfarb were recused from this case.

MOTION: Dr. Petelin moved to approve the draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand for failing to consider and pursue a diagnosis of pulmonary embolism and failing to perform an adequate examination, including pulse oximetry and measuring of vital signs in a patient complaining of respiratory symptoms.

SECONDED: Ms. Griffen

VOTE: 6-yay, 2-nay, 0-abstain, 2-recuse, 2-absent.

MOTION PASSED.

# **WEDNESDAY, APRIL 2, 2008**

# **CALL TO ORDER**

The meeting was called to order at 9:30 a.m.

#### **ROLL CALL**

The following Board Members were present: Dr. Goldfarb, Ms. Griffen, Ms. Ibáñez, Dr. Krishna, Dr. Lee, Dr. Lefkowitz, Dr. Mackstaller, Dr. Martin, Dr. Pardo, Dr. Petelin, Ms. Proulx, and Dr. Schneider.

#### **CALL TO PUBLIC**

JK was present and spoke during the call to public with regard to case #MD-07-0471A regarding Ruth E. Kohlmeier, M.D. JK's case was previously dismissed by the Board. JK stated that Dr. Kohlmeier never documented that his son, NK, had a head injury on her autopsy report. JK stated he has submitted a request for information regarding NK that is in the Board's possession, but has not received a response. He stated that the Board was wrong in determining that Dr. Kohlmeier met the standard of care in his case. All other statements issued during the call to public appear beneath the case referenced.

#### HOMEOPATHIC BOARD OMNIBUS BILL PRESENTATION

Todd A. Rowe, MD(h), addressed the Board along with Christine Springer, Arizona Homeopathic Board Executive Director. Dr. Rowe, who is dually licensed by both the AMB and the Homeopathic Board, explained that homeopathic medicine is a system of medicine that seeks to stimulate the body's own healing response when health problems develop. Dr. Rowe informed the Board that the very first school of homeopathy medicine in the country will be built in Arizona and is expected to open in 2010. The degree awarded will be a DCH: Doctor of Classic Homeopathy. Dr. Rowe stated that the Homeopathic Board issues and renews

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licenses and conducts investigations and hearings concerning unprofessional conduct. The Homeopathic Board consists of four homeopathic physicians and two public members.

Ms. Springer stated the Omnibus Bill will change licensing requirements and clarify that a homeopathic physician does not practice allopathic medicine unless dually licensed. Additionally, the Homeopathic Board's name will change to Arizona Board of Homeopathic and Integrated Medical Examiners to further clarify that homeopathic physicians practice integrated medicine. Should this Bill pass, licensing requirements will prohibit applicants from qualifying for licensure for five years following revocation or surrender of their license to another jurisdiction. In addition, licensure renewals will require twenty hours CME per year. The patient consent form will clarify to patients that the physician is a physician of homeopathy rather than allopathy. This will also clarify for physicians that are dually licensed which license they are using when treating patients. Ms. Springer stated that they hope for further cooperation and dialogue with the medical boards to assist in their transitions.

The Board was concerned with homeopathic physicians advertising which regulatory authority issued their licenses. Ms. Springer stated that their transitions are a work in progress and will be dealing with the licensee advertisements. Dr. Rowe stated that by Rule, homeopathic physicians are not allowed to only use the title MD, they are required to list the (h) after to designate that they are physicians of homeopathic medicine. Dr. Goldfarb noted licensees that the Board had taken action against, but the Homeopathic Board did nothing. Dr. Goldfarb was concerned that a physician will have the ability to choose which license to practice with, knowing the Homeopathic Board is more lenient. Board Members expressed concern for the different standard between both boards. Dr. Rowe and Ms. Springer expressed to the Board that the Homeopathic Board is working very diligently to work as this Board does.

# FORMAL INTERVIEWS

ı	NO.	CASE NO.	СОМІ	PLAINANT v PHYSICIAN	LIC.#	RESOLUTION
	1.	MD-07-0671A	K.P.	ANTHONY D. GRECO, M.D.	22688	Issue an Advisory Letter for failing to rule out infection prior to prescribing steroids and for failing to timely recognize and treat a patient's mesh infection with antibiotics for a sufficient duration. Within 6 months, obtain 10-15 hours non-disciplinary CME in the management of surgical site infection. There is insufficient evidence to support discipline.

KP addressed the Board during the call to public. She stated Dr. Greco failed to adequately care for her and he should be held accountable. Dr. Greco was present with legal counsel, Mr. Daniel P. Jantsch. Drs. Krishna and Petelin stated they knew Mr. Jantsch, but it would not affect their ability to adjudicate this case. William Wolf, M.D., Medical Consultant, summarized the case stating that Dr. Greco treated KP's postoperative incisional inflammatory symptoms with corticosteroids when infection had not been entirely excluded and failed to treat KP's mesh infection with antibiotics for a sufficient duration. Dr. Greco stated that at the time that he saw KP postoperatively, he was not able to make the diagnosis of infection. The Board noted that Dr. Greco did not dictate his operative report until twelve to thirteen days post surgery. Dr. Greco agreed that operative reports should be dictated immediately following surgery to best reflect what occurred during the operation.

Dr. Greco stated KP did not have unusual postoperative complaints during the first month, which is typically when complications are noted. Dr. Greco said he had experience in treating infections, but none that were not obviously present and none that generated from ventral hernia repair. Mr. Jantsch stated there was no evidence to support that the infection was present when Dr. Greco saw KP and asked that the Board keep in mind that this was a perplexing case that resulted in a bad outcome. He asked that the Board consider dismissal. Dr. Petelin stated that Dr. Greco should have been aware of the infection sooner and started aggressive treatment. Dr. Petelin stated this case does not rise to the level of discipline as the outcome may not have been different.

MOTION: Dr. Petelin moved to issue an Advisory Letter for failing to rule out infection prior to prescribing steroids and for failing to timely recognize and treat a patient's mesh infection with antibiotics for a sufficient duration. Within 6 months, obtain 10-15 hours non-disciplinary CME in the management of surgical site infection. There is insufficient evidence to support discipline.

SECONDED: Dr. Goldfarb

Dr. Lee spoke in favor of the motion, but was concerned that Dr. Greco discounted the small amount of staph that was present in the mesh. Dr. Mackstaller spoke in favor of the motion, but was concerned that Dr. Greco failed to follow up on cultures.

ROLL CALL VOTE: Roll call vote was taken and the following Board Members voted in favor of the motion: Dr. Goldfarb, Ms. Griffen, Ms. Ibáñez, Dr. Krishna, Dr. Lee, Dr. Lefkowitz, Dr. Mackstaller, Dr. Martin, Dr. Petelin, and Dr. Schneider. The following Board Member was abstained: Dr. Pardo. The following Board Member was absent: Ms. Proulx.

VOTE: 10-yay, 0-nay, 1-abstain, 0-recuse, 1-absent.

MOTION PASSED.

# **CALL TO PUBLIC**

Statements issued during the call to public appear beneath the case referenced.

# FORMAL INTERVIEWS

NO.	CASE NO.	COMP	PLAINANT v PHYSICIAN	LIC.#	RESOLUTION
2.	MD-07-0586A	N.R.	RONALD B. JOSEPH, M.D.	8699	Draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand for placing a prosthetic arthroplasty implant into a recently infected shoulder and for failing to properly treat a recurrently infected shoulder prosthesis.

Dr. Martin was recused from this case. Dr. Goldfarb stated that he knows the law firm of Gallagher and Kennedy, but not the counsel present. He stated this will not affect his ability to adjudicate this case. Dr. Joseph was present with legal counsel, Mr. Jeffrey Pyburn. Gerald Moczynski, M.D., Medical Consultant, summarized the case stating that Dr. Joseph placed a prosthetic arthroplasty implant into a recently infected shoulder joint and failed to adequately treat a recurrent infection.

Dr. Joseph stated he appreciated NR's infection as well as the dislocation that was previously undiagnosed. He stated his goal was to provide plate fixation and maintain the original joint as opposed to a prosthesis. He stated numerous tests were obtained to determine the status of the infection, but none of the tests demonstrated an ongoing infection. Dr. Joseph's operative report stated it was too late to do a fixation and; therefore, he had to proceed with prosthesis. Dr. Joseph said the decision was made to not remove the prosthesis based on NR's desire to not undergo additional surgery. Mr. Pyburn commented that what Dr. Joseph did was supported by the evidence and there was no standard of care issue in this case. Dr. Krishna stated the standard of care has always been the same with orthopedic infection. He said orthopedic physicians were more conservative in 2003 around the time this incident occurred.

MOTION: Dr. Krishna moved for a finding of Unprofessional Conduct in violation of A.R.S. §32-1401 (27)(q) - Any conduct that is or might be harmful or dangerous to the health of the patient or the public; and A.R.S. §32-1401 (27)(II)- Conduct that the board determines is gross negligence, repeated negligence or negligence resulting in harm to or the death of a patient.

SECONDED: Dr. Lee

VOTE: 7-yay, 3-nay, 1-abstain, 1-recuse, 0-absent.

MOTION PASSED.

MOTION: Dr. Krishna moved for a draft Findings of Fact, Conclusions of Law and Order for a Letter of Reprimand for placing a prosthetic arthroplasty implant into a recently infected shoulder and for failing to properly treat a recurrently infected shoulder prosthesis.

SECONDED: Dr. Petelin

Dr. Krishna stated he believes Dr. Joseph was well trained and very knowledgeable, but failed to meet the standard of care in this case.

ROLL CALL VOTE: Roll call vote was taken and the following Board Members voted in favor of the motion: Dr. Goldfarb, Ms. Griffen, Ms. Ibáñez, Dr. Krishna, Dr. Lee, Dr. Petelin, and Ms. Proulx. The following Board Members voted against the motion: Dr. Lefkowitz, Dr. Mackstaller, and Dr. Schneider. The following Board Member was abstained: Dr. Pardo. The following Board Member was recused: Dr. Martin.

VOTE: 7-yay, 3-nay, 1-abstain, 1-recuse, 0-absent.

MOTION PASSED.

NO.	CASE NO.	СОМ	PLAINANT v PHYSICIAN	LIC.#	RESOLUTION		
3.	MD-07-0353A	C.F.	BRIAN PETERS, M.D.	28026	Issue an Advisory Letter for failing to perform an adequate focused examination with respect to the patient's presenting symptoms. This matter does not rise to the level of discipline.		

Dr. Peters was present with legal counsel, Mr. Timothy G. Kasparek. Bhupendra Bhatheja, M.D., Medical Consultant, summarized the case for the Board. Staff found that Dr. Peters failed to perform an adequate neurological examination on patient CF when she complained of back pain. Staff noted that his history involved a similar violation and opined that he has not remedied his deviations. Dr. Peters told the Board he performed an appropriate examination to the extent that it ruled out any emergent neurologic condition. He stated that there were no signs of infection and therefore this was a chronic pain situation. He stated the most appropriate course of treatment was to treat her in the department and refer her back to her primary care provider. Ms. Ibáñez noted that Dr. Peters documented that CF's pain pump was not working and that it was a mechanical issue.

Dr. Goldfarb stated that assessments in the emergency room (ER) are even more important based on the need to go to the ER because some patients cannot see their primary care provider as urgently as they may need. Dr. Peters told the Board that its point is well taken and he will conduct more detailed examinations in the future. Dr. Martin noted that Dr. Peters stated the ER was very busy, but the complainant's letter to the Board stated there were only two other patients in the ER that day. Dr. Peters did not recall the number of patients in the ER the morning he saw CF. Mr. Kasparek told the Board that Dr. Peters was only noticed regarding his failure to adequately perform a neurological examination. He stated that with all the information at that time, Dr. Peters acted appropriately and met the standard of care in this case. Mr. Kasparek said there was no repetitive conduct in this case and; therefore, the matter does not rise to the level of discipline.

Dr. Goldfarb identified potential harm in the increased risk of treatment delay. He stated the standard of care requires a physician to perform an adequate examination for back pain. Dr. Peters failed to perform an adequate neurological examination in a patient with complaints for which she presented to the ER.

MOTION: Dr. Goldfarb moved for a finding of Unprofessional Conduct in violation of A.R.S. §32-1401 (27)(q) - Any conduct that is or might be harmful or dangerous to the health of the patient or the public.

SECONDED: Dr. Martin

VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED.

Dr. Goldfarb stated he did not expect Dr. Peters to conduct an exhaustive examination on every patient that presents to the ER, but Dr. Peters should conduct an organ-specific examination. Dr. Goldfarb found it mitigating that the patient did not sustain harm, but stated that he hoped Dr. Peters learned something from this case.

MOTION: Dr. Goldfarb moved to issue an Advisory Letter for failing to perform an adequate focused examination with respect to the patient's presenting symptoms. This matter does not rise to the level of discipline.

SECONDED: Dr. Mackstaller

Dr. Lee stated he was not convinced that Dr. Peters is aware of what a neurology examination involves. Dr. Goldfarb stated he believed Dr. Peters has learned from this mistake.

ROLL CALL VOTE: Roll call vote was taken and the following Board Members voted in favor of the motion: Dr. Goldfarb, Ms. Griffen, Ms. Ibáñez, Dr. Krishna, Dr. Lee, Dr. Lefkowitz, Dr. Mackstaller, Dr. Martin, Dr. Pardo, Dr. Petelin, Ms. Proulx, and Dr. Schneider.

VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED.

MOTION: Dr. Lee moved to suspend the meeting.

SECONDED: Dr. Krishna

VOTE: 12-yay, 0-nay, 0-abstain, 0-recuse, 0-absent.

MOTION PASSED.

# THURSDAY, APRIL 3, 2008

#### **CALL TO ORDER**

The meeting was called to order at 8:00 a.m.

# **ROLL CALL**

The following Board Members were present: Dr. Goldfarb, Ms. Griffen, Dr. Lee, Dr. Lefkowitz, Dr. Mackstaller, Dr. Martin, Dr. Pardo, Dr. Petelin, Ms. Proulx, and Dr. Schneider. The following Board Members were absent: Ms. Ibáñez and Dr. Krishna.

# **CALL TO PUBLIC**

Statements issued during the call to public appear beneath the case referenced.

# FORMAL HEARING MATTERS – CONSIDERATION OF ADMINISTRATIVE LAW JUDGE (ALJ) RECOMMENDATION

NO.	CASE NO.	COMPLAIN	ANT v PHYSICIAN	LIC.#	RESOLUTION
1.	MD-07-0412A	AMB	ELI J. HAMMER, M.D.	17176	Dismiss.

The Board Members confirmed that they received and reviewed the administrative record of this matter. Dean Brekke, Assistant Attorney General, summarized the case for the Board. This case commenced from another investigation regarding quality of care issues. Dr. Hammer refused to attend an inpatient evaluation and in July 2007, the Board summarily suspended his license for violating a Board Order. This matter went to Formal Hearing and the ALJ issued a recommendation for dismissal. The ALJ looked back at the record that was presented to the Board and found that the Board was not justified in suspending Dr. Hammer's license and that there was insufficient evidence to have ordered the inpatient evaluation.

Debra Hill was present on behalf of Dr. Hammer. Ms. Hill urged the Board to accept the ALJ's recommendation. She stated there was no basis for the Board's Order for an inpatient evaluation and there was no immediate threat to patients or the public. Dr. Petelin questioned if the findings were approved, whether the Board would have the opportunity to cite Dr. Hammer for possible diversion violations. Chris Munns, Assistant Attorney General, informed the Board that the ALJ's decision only involved violation of the Board Order. Mr. Munns also advised that the Board may open an investigation to address any additional violations. Dr. Goldfarb recalled the summary suspension was due to Dr. Hammer's failure to comply with the Board Order.

MOTION: Dr. Goldfarb moved to enter into executive session.

SECONDED: Dr. Lefkowitz

Vote: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent. MOTION PASSED.

The Board went into Executive Session for legal advice at 8:13 a.m.

The Board returned to Open Session at 8:59 a.m.

No deliberations or discussions were made during Executive Session.

Dr. Goldfarb stated this was a complex case and Board members take their duties very seriously. At times, Board members are called on an emergency basis in order to protect the public. Dr. Goldfarb stated that the public has benefited from the Board's summary actions in the past. He stated the Board also takes violations of Board Orders very seriously. Dr. Goldfarb suggested adding language to the Findings of Fact to reflect that the Board made its decision on the basis that licensees need to comply with Board Orders until such time that the Board can further investigate.

MOTION: Dr. Lee moved to accept the ALJ's recommended Findings of Fact.

SECONDED: Dr. Petelin

VOTE: 8-yay, 2-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

Dr. Lee requested the record reflect that despite the findings, he was concerned with Dr. Hammer taking it upon himself to violate the Board's Order. The Board considered modifications to Conclusions of Law numbers 4 and 5 to reflect the Board's concerns.

MOTION: Dr. Lee moved to adopt the ALJ's recommended Conclusions of Law with the modifications as follows:

Conclusions of Law #4: Respondent did not violate the provisions of ARS 32-1401(27)(r). The Board notes that the Respondent did not undergo the Board's Interim Order for inpatient evaluation. The Board believes that Respondent's duty to comply with Board Orders is of significant importance and is troubled by Respondent's failure to comply with the Board Order. However, after subsequent review of the cumulative record, there is insufficient evidence to support the Board's June 29, 2007 Interim Order for inpatient evaluation.

Conclusions of Law #5: The evidence on the record does not support the Board's summary suspension of Respondent's medical license pursuant to ARS 32-1451(D). The Board's primary duty is to protect the health and safety of the public and is authorized by statute to take summary action to that effect. In this case, however, the cumulative evidence does not support the summary action.

The ALJ stated there was insufficient evidence to support the Board's summary action; however, Board members stated that the Board is always concerned when a physician does not comply with a Board Order. The Board was concerned that the ALJ came to this conclusion while reviewing more information than what the Board had at the time of the summary action.

SECONDED: Dr. Petelin

VOTE: 9-yay, 1-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

MOTION: Dr. Mackstaller moved to adopt the ALJ's recommended Order for Dismissal.

SECONDED: Dr. Petelin

ROLL CALL VOTE: Roll call vote was taken and the following Board Members voted in favor of the motion: Dr. Goldfarb, Ms. Griffen, Dr. Lee, Dr. Lefkowitz, Dr. Mackstaller, Dr. Petelin, Ms. Proulx, and Dr. Schneider. The following Board Members voted against the motion: Dr. Martin and Dr. Pardo. The following Board Members were absent: Ms. Ibáñez and Dr. Krishna.

VOTE: 8-yay, 2-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

The Board instructed Board Staff to open a new investigation regarding Dr. Hammer's possible diversion violations.

### **OTHER BUSINESS**

NO.	CASE NO.	COMPLAINANT v PHYSICIAN		LIC.#	RECOMMENDATION
1.	MD-07-0617A	AMB	ELI J. HAMMER, M.D.	17176	Decline referral to Formal Hearing and return for further investigation.

Kelly Sems, M.D., Chief Medical Consultant, summarized the case for the Board. The Board initiated this case after receiving a complaint from the Drug Enforcement Agency (DEA). Thirteen patient charts were reviewed by an Outside Medical Consultant (OMC) who found multiple deviations from the standard of care. Debra Hill addressed the Board on behalf of Dr. Hammer. She pointed out that the complaint from the DEA did not involve patient care. With regard to the deviations, she stated that Dr. Hammer responded specifically to each one, but his response was ignored by the OMC as his supplemental report did not address any of the allegations. Ms. Hill stated Dr. Hammer declined an invitation for formal interview because that would require waiving his rights to a full evidentiary hearing.

MOTION: Dr. Martin moved to go into executive session.

SECONDED: Dr. Petelin

Vote: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

The Board went into Executive Session for legal advice at 9:49 a.m.

The Board returned to Open Session at 10:03 a.m.

No deliberations or discussions were made during Executive Session.

Board Members discussed returning the case for further investigation to allow the OMC the opportunity to address opposing counsel's concerns. The Board further discussed sending this case out for a second opinion by another OMC.

MOTION: Dr. Mackstaller moved to decline referral to Formal Hearing and return for further investigation.

SEONCDED: Dr. Lee

VOTE: 9-yay, 1-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	COMF	PLAINANT v PHYSICIAN	LIC.#	RECOMMENDATION
2.	MD-02-0749A	AMB	HARA P. MISRA, M.D.	14933	Approve the Board Order for a Letter of Reprimand for failure to properly manage complications related to a surgical procedure resulting in a potential life threatening condition. Two Years Probation to obtain 20 hours CME for the indications of placement of vena cava filters. The probationary terms were completed under the Board's previous Findings of Fact, Conclusions of Law, and Order issued on July 6, 2005.

MOTION: Dr. Lee moved to approve the Board Order for a Letter of Reprimand for failure to properly manage complications related to a surgical procedure resulting in a potential life threatening condition. Two Years Probation to obtain 20 hours CME for the indications of placement of vena cava filters. The probationary terms were completed under the Board's previous Findings of Fact, Conclusions of Law, and Order issued on July 6, 2005.

SECONDED: Ms. Proulx

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	COMP	PLAINANT v PHYSICIAN	LIC.#	RECOMMENDATION
3.	MD-05-0866A	AMB	TIMOTHY J. GELETY, M.D.	1 / 100 1	Approve the Board Order for a Letter of Reprimand for not being available in a timely fashion to evaluate a post-operative patient.

MOTION: Dr. Petelin moved to approve the Board Order for a Letter of Reprimand for not being available in a timely fashion to evaluate a post-operative patient.

SECONDED: Ms. Griffen

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

NO.	CASE NO.	COMP	PLAINANT v PHYSICIAN	LIC.#	RECOMMENDATION
4.	MD-05-0653A	M.H.	STEPHEN E. FLYNN, M.D.		Rescind referral to Formal Hearing and accept proposed consent agreement for surrender of license.

Dr. Petelin was recused from this case. Emma Mamaluy, Assistant Attorney General, informed the Board that Dr. Flynn signed a consent agreement for surrender of his license to practice medicine in Arizona. She stated that in this particular case, there were significant issues regarding the clinic he was operating in terms of records, hygiene, and overall operation. She stated that this surrender would help to protect the public.

MOTION: Dr. Lee moved to rescind referral to Formal Hearing and accept proposed consent agreement for surrender of license.

SECONDED: Ms. Proulx

ROLL CALL VOTE: Roll call vote was taken and the following Board Members voted in favor of the motion: Dr. Goldfarb, Ms. Griffen, Dr. Lee, Dr. Lefkowitz, Dr. Mackstaller, Dr. Martin, Dr. Pardo, Ms. Proulx, and Dr. Schneider. The following Board Members were absent: Ms. Ibáñez and Dr. Krishna.

VOTE: 9-yay, 0-nay, 0-abstain, 1-recuse, 2-absent.

MOTION PASSED.

NC	. CASE NO.	COMF	PLAINANT v PHYSICIAN	LIC.#	RECOMMENDATION
5.	MD-06-L020A	AMB	STANLEY S. RACZ, M.D.	N/A	Deny the motion for rehearing.

At its February 2008 regular session meeting, the Board upheld the Administrative Law Judge's decision to deny Dr. Racz's request for licensure. Dr. Racz requested the Board rehear this matter. Dean Brekke, Assistant Attorney General, stated that Dr. Racz did not meet the statutory requirement for granting a rehearing.

MOTION: Dr. Martin moved to deny the motion for rehearing.

SECONDED: Dr. Petelin

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

N	CASE NO.	COMF	PLAINANT v PHYSICIAN	LIC.#	RECOMMENDATION
6	MD-05-0456A MD-05-1003A MD-06-0196A	AMB L.J. AMB	OLE G. TORJUSEN, M.D.		Rescind referral to Formal Hearing and accept proposed consent agreement for surrender of license.

Mr. Brekke presented this matter to the Board. He stated that the three cases date back to 2005 and 2006. These matters were referred to Formal Hearing as the Board was unsuccessful in reaching Dr. Torjusen. A week prior to the hearing date, Dr. Torjusen responded to the Board and signed a disciplinary consent agreement for surrender of his license to practice medicine in Arizona.

MOTION: Dr. Mackstaller moved to rescind the referral to Formal Hearing and accept proposed consent agreement for surrender of license.

SECONDED: Ms. Griffen

ROLL CALL VOTE: Roll call vote was taken and the following Board Members voted in favor of the motion: Dr. Goldfarb, Ms. Griffen, Dr. Lee, Dr. Lefkowitz, Dr. Mackstaller, Dr. Martin, Dr. Pardo, Dr. Petelin, Ms. Proulx, and Dr. Schneider. The following Board Members were absent: Ms. Ibáñez and Dr. Krishna.

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

#### **FORMAL INTERVIEWS**

NO.	CASE NO.	COMP	LAINANT v PHYSICIAN	LIC.#	RESOLUTION
1.	MD-07-0537A	AMB	MUZAKEER A. SHAIK, M.D.	35244	Issue an Advisory Letter for failing to aggressively treat a positive culture of staph aureus and to provide antibiotic coverage. This was a technical violation and there was insufficient evidence to support discipline.

Dr. Shaik was present with legal counsel, Mr. Kraig Marton. Kathleen Coffer, M.D., Medical Consultant, summarized the case for the Board in stating that Dr. Shaik failed to recognize gram positive sepsis and broaden antibiotic coverage. He failed to consult an infectious disease specialist in a complicated sepsis patient and did not involve a pulmonary consultant until patient HO required intubation. Dr. Shaik also failed to adequately assess HO's worsened abdominal pain and associated failing hemoglobin and hematocrit. Dr. Shaik stated he was practicing in Lake Havasu City when this occurred. He informed the Board that this was during his first week working as a hospitalist in Arizona. He stated he did the best to his knowledge and did not deviate from the standard of care and that he has learned from this incident. Dr. Shaik stated he did not treat HO aggressively because clinically, he was improving. Dr. Petelin was concerned with Dr. Shaik's use of moderate doses of morphine to treat HO's pain without attempting to find the source of his pain. Mr. Marton commented that medicine is not an exact science. He referred to five medical reviewers who opined that Dr. Shaik met the standard of care in this case and requested dismissal. Dr. Mackstaller noted that Dr. Shaik was in a very difficult situation with no adequate or readily available back up.

MOTION: Dr. Mackstaller moved for a finding of Unprofessional Conduct in violation of A.R.S. §32-1401 (27)(q) - Any conduct that is or might be harmful or dangerous to the health of the patient or the public.

SECONDED: Dr. Lefkowitz

VOTE: 10-yay, 0-nay, 0-abstain, 0-recuse, 2-absent.

MOTION PASSED.

Dr. Mackstaller noted several mitigating factors, but stated that HO sustained actual harm. She opined that Dr. Shaik deviated from the standard of care by failing to aggressively treat HO and by failing to broaden the antibiotic coverage. Dr. Mackstaller noted the actual harm in this case was patient death.

MOITON: Dr. Mackstaller moved to issue an Advisory Letter for failing to aggressively treat a positive culture of staph aureus and to provide antibiotic coverage. This was a technical violation and there was insufficient evidence to support discipline.

SECONDED: Ms. Proulx

Dr. Petelin spoke against the motion and stated he believed the case rises to the level of discipline. Dr. Petelin noted a significant failure to respond and treat a seventy-five year-old male with sepsis. Dr. Schneider spoke in favor of the motion and noted that a urine culture was obtained, but the results were not received until after HO's death. Dr. Martin stated he does not take into account where the incident occurs and stated regardless of where a patient lives, all patients deserve to receive the best care. However, Dr. Martin stated that knowing that this occurred when Dr. Shaik had recently completed training and that there was no prior Board history; he spoke in favor of the motion.

ROLL CALL VOTE: Roll call vote was taken and the following Board Members voted in favor of the motion: Ms. Griffen, Dr. Lefkowitz, Dr. Mackstaller, Dr. Martin, Ms. Proulx, and Dr. Schneider. The following Board Members voted against the motion: Dr. Goldfarb, Dr. Pardo and Dr. Petelin. The following Board member was abstained: Dr. Lee. The following Board Members were absent: Ms. Ibáñez and Dr. Krishna.

VOTE: 6-yay, 3-nay, 1-abstain, 0-recuse, 2-absent.

MOTION PASSED.

#### CALL TO THE PUBLIC

Statements issued during the call to public appear beneath the case referenced.

# **FORMAL INTERVIEWS**

I	NO.	CASE NO.	COMPLAINANT v PHYSICIAN		LIC.#	RESOLUTION	
	3.	MD-07-0131A	A.A.	SCOTT A. WASSERMAN, M.D.	23328	Draft Findings of Fact, Conclusions of Law and Order for a Decree of Censure for knowingly making a fraudulent statement regarding his credentials on a patient consent form signed prior to surgery. Five Years Probation with random chart reviews, as determined by Board staff and 20 hours CME in ethical issues related to surgical practice. The probation shall be in addition to any other probationary order.	

Dr. Wasserman was present with legal counsel, Ms. Cristina Chait. Tina Geiser, Case Review Assistant Manager, summarized the matter for the Board. This case was initially considered by the Board at its August 2007 regular session meeting for review of the Executive Director's dismissal. During the meeting, AA addressed the Board during the call to public. The Board pulled this case for discussion and returned it for further investigation as it was concerned Dr. Wasserman may have been practicing outside the scope of his training. In re-reviewing the case, Board Staff identified an additional violation as Dr. Wasserman referred to himself as a plastic surgeon in the informed consent form. Dr. Wasserman told the Board he has been practicing cosmetic procedures for approximately six years. Dr. Wasserman said his training in the technical aspects of blepharoplasty involved CME and observation by another physician while he performed the procedures. Dr. Wasserman stated he was not aware that the consent form indicated he was a plastic surgeon.

Dr. Wasserman informed the Board that he has performed approximately two dozen blepharoplasties within the past two years without complications. Dr. Goldfarb was concerned with Dr. Wasserman's medical records as there were three different signatures of his and he did not document discussions with the patient regarding treatment options. Board members expressed their concern that when a complication occurs from surgery, Dr. Wasserman may not be trained or have the ability to properly deal with it. Ms. Chait reminded the Board that this was originally dismissed as the Outside Medical Consultant (plastic surgery) found that Dr. Wasserman met the standard of care in this case. Dr. Goldfarb opined that in order to protect the public, the Board needs to be sure that physicians are adequately trained. Dr. Goldfarb found misrepresentation in Dr. Wasserman's consent form indicating he is a plastic surgeon. Dr. Goldfarb noted that the consent form also included a statement of a society in which Dr. Wasserman is not a member and his web site may be misleading patients into thinking he is a plastic surgeon. Dr. Goldfarb said the public has the right to get the correct information from their doctor and from their surgeon to make a decision. Dr. Goldfarb also noted that Dr. Wasserman has received two letters of reprimand in the past two years.

MOTION: Dr. Goldfarb moved for a finding of Unprofessional Conduct in violation of A.R.S. §32-1401 (27)(t)- Knowingly making any false or fraudulent statement, written or oral, in connection with the practice of medicine or if applying for privileges or renewing an application for privileges at a health care institution.

SECONDED: Dr. Petelin

The Board confirmed that the misrepresentation in Dr. Wasserman's consent form was in connection with the practice of medicine.

MOTION: Dr. Pardo moved to enter into executive session.

SECONDED: Ms. Proulx

Vote: 9-yay, 0-nay, 0-abstain, 0-recuse, 3-absent.

MOTION PASSED.

The Board went into Executive Session for legal advice at 2:56 p.m.

The Board returned to Open Session at 3:06 p.m.

No deliberations or discussions were made during Executive Session.

VOTE: 9-yay, 0-nay, 0-abstain, 0-recuse, 3-absent. MOTION PASSED.

MOTION: Dr. Goldfarb moved for a draft Findings of Fact, Conclusions of Law and Order for a Decree of Censure for knowingly making a fraudulent statement regarding his credentials on a patient consent form signed prior to surgery. Five Years Probation with random chart reviews, as determined by Board staff and 20 hours CME in ethical issues related to surgical practice. The probation shall be in addition to any other probationary order.

# SECONDED: Dr. Petelin

Dr. Goldfarb requested random chart reviews since Dr. Wasserman testified that within the past two years he performed approximately two dozen blepharoplasties without complications. Dr. Martin suggested Dr. Wasserman obtain CME hours in ethical issues related to surgical practices. The Board noted that Dr. Wasserman is currently under another probationary order that went into effect in September 2007. Dr. Goldfarb requested the five years probation to begin at the completion of Dr. Wasserman's current probationary order.

ROLL CALL VOTE: Roll call vote was taken and the following Board Members voted in favor of the motion: Dr. Goldfarb, Ms. Griffen, Dr. Lee, Dr. Lefkowitz, Dr. Mackstaller, Dr. Martin, Dr. Pardo, Dr. Petelin, and Ms. Proulx. The following Board Members were absent: Ms. Ibáñez, Dr. Krishna, and Dr. Schneider.

**VOTE:** 9-yay, 0-nay, 0-abstain, 0-recuse, 3-absent. **MOTION PASSED.** 



The meeting adjourned at 3:44 p.m.

Lisa S. Wynn, Executive Director

In Chym